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Fill in t	this information to identify your case:	Ch	eck one box only as di	rected in this form and	in Form
Debtoi			2A-1Supp:	rected in this form and	
Debtoi (Spouse	72		■ 1. There is no presu	umption of abuse	
	States Bankruptcy Court for the: Southern District of	of New York	applies will be m	o determine if a presun nade under <i>Chapter 7 I</i>	•
Case r	number n)		☐ 3. The Means Test	cial Form 122A-2). does not apply now be service but it could ap	
			☐ Check if this is a	n amended filing	
	<u>cial Form 122A - 1</u>				
Cha	pter 7 Statement of Your Cur	rent Monthly Inc	ome		12/19
attach a case nu	omplete and accurate as possible. If two married people as separate sheet to this form. Include the line number to with the line number (if known). If you believe that you are exempted from military service, complete and file Statement of Exempted Calculate Your Current Monthly Income	which the additional information a m a presumption of abuse becau	applies. On the top of an se you do not have prin	ny additional pages, writ narily consumer debts o	e your name and r because of
1. <b>V</b>	What is your marital and filing status? Check one on	ıly.			
	Not married. Fill out Column A, lines 2-11.				
	☐ Married and your spouse is filing with you. Fill ou	ut both Columns A and B, lines	2-11.		
	☐ Married and your spouse is NOT filing with you.	You and your spouse are:			
	☐ Living in the same household and are not lega	Illy separated. Fill out both Co	lumns A and B, lines 2	? <del>-</del> 11.	
	Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evading	egally separated under nonban	kruptcy law that applie	es or that you and your	
101( the 6	In the average monthly income that you received from all (10A). For example, if you are filing on September 15, the 6-m of months, add the income for all 6 months and divide the total uses own the same rental property, put the income from that p	onth period would be March 1 throuby 6. Fill in the result. Do not include	ugh August 31. If the amo de any income amount mo	unt of your monthly incomore than once. For examp	e varied during le, if both
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	our gross wages, salary, tips, bonuses, overtime, ayroll deductions).	and commissions (before all	\$	\$	
	<b>llimony and maintenance payments.</b> Do not include column B is filled in.	payments from a spouse if	\$	\$	
<b>o</b> fr a	Ill amounts from any source which are regularly part you or your dependents, including child support. om an unmarried partner, members of your household not roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3.	Include regular contributions , your dependents, parents,	\$	\$	
5. <b>N</b>	let income from operating a business, profession,				
_		Debtor 1			
	Gross receipts (before all deductions)	\$ -\$			
	Ordinary and necessary operating expenses	· —— • •	\$	\$	
	let monthly income from a business, profession, or farr	coby nerc >	Ψ	Ψ	
6. N	let income from rental and other real property	Debtor 1			
G	Gross receipts (before all deductions)	\$			
	Ordinary and necessary operating expenses	-\$			
	let monthly income from rental or other real property	\$ Copy here ->	\$	\$	
	nterest dividends and royalties	<del></del>	\$	\$	

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Robert T. Elliott Debtor 1 Case number (if known)

		Column A	Column B		
		Debtor 1	Debtor 2 or non-filing spouse		
8.	Unemployment compensation	\$	\$		
	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:				
	For you \$ For your spouse \$				
9.	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.		\$		
10	Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other				
	sources on a separate page and put the total below				
	•	\$	\$		
	Total accounts from a constant of the constant	\$	\$		
	Total amounts from separate pages, if any.	*	*		
11.	Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	+ _	= \$		
			Total current monthly income		
Pari	2: Determine Whether the Means Test Applies to You		income		
	7				
12	Calculate your current monthly income for the year. Follow these steps:				
	12a. Copy your total current monthly income from line 11	Copy line 11 h			
	Multiply by 12 (the number of months in a year)		<b>x</b> 12		
	12b. The result is your annual income for this part of the form		12b. \$		
13	Calculate the median family income that applies to you. Follow these steps:				
	Fill in the state in which you live.				
	,				
	Fill in the number of people in your household.				
	Fill in the median family income for your state and size of household				
14	How do the lines compare?				
	14. How do the lines compare?  14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, <i>There is no presumption of abuse</i> .  Go to Part 3. Do NOT fill out or file Official Form 122A-2.				
	14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption of abuse is determined by Form 122A-2</i> .  Go to Part 3 and fill out Form 122A–2.				
Pari	Part 3: Sign Below				
	By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.				
	X /s/ Robert T. Elliott				
	Robert T. Elliott Signature of Debtor 1				

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Debtor 1	Robert T. Elliott	Case number (if known)	

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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Fill in	this info	rma	tion to identify your case:	
Debtor	1	Ro	bert T. Elliott	
Debtor (Spous	· 2 se, if filing	1)		
United	States B	ankr	uptcy Court for the: Southern District of New York	
	number			☐ Check if this is an amended filing
(if knov				Official tries is an american ming
Stat	emer	nt (	n 122A - 1Supp of Exemption from Presumption of Ab	
exempt exclusi	ted from ons in th	a pr is s	It together with Chapter 7 Statement of Your Current Monthly Inco esumption of abuse. Be as complete and accurate as possible. If tatement applies to only one of you, the other person should compose \$707(b)(2)(C).	wo married people are filing together, and any of the
Part 1	lde	ntify	the Kind of Debts You Have	
pe	ersonal, f	amil	s primarily consumer debts? Consumer debts are defined in 11 U.S. y, or household purpose." Make sure that your answer is consistent witing for Bankruptcy (Official Form 1).	
			Form 122A-1; on the top of page 1 of that form, check box 1, <i>There is a</i> sement with the signed Form 122A-1.	no presumption of abuse, and sign Part 3. Then submit this
	Yes. G		-	
Part 2:	Det	erm	ine Whether Military Service Provisions Apply to You	
2. <b>A</b>	re you a	disa	abled veteran (as defined in 38 U.S.C. § 3741(1))?	
	No. G			
		•	ou incur debts mostly while you were on active duty or while you were p. S.C. § 101(d)(1); 32 U.S.C. § 901(1).	erforming a homeland defense activity?
		).	Go to line 3.	
	□ Ye		Go to Form 122A-1: on the top of page 1 of that form, check box 1, <i>Th</i> submit this supplement with the signed Form 122A-1.	ere is no presumption of abuse, and sign Part 3. Then
3. <b>A</b>	re you o	r ha	ve you been a Reservist or member of the National Guard?	
	] No. (	Com	plete Form 122A-1. Do not submit this supplement.	
	Yes.	Vere	e you called to active duty or did you perform a homeland defense activ	ity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
	□ No	).	Complete Form 122A-1. Do not submit this supplement.	
	□Y€	s.	Check any one of the following categories that applies:	
	I		I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.	If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, <i>The Means Test does not apply now</i> , and sign Part 3. Then
			I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on, which is fewer than 540 days before I file this bankruptcy case.	submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The <i>exclusion period</i> means the time you are on active duty or are performing a
	I		I am performing a homeland defense activity for at least 90 days.	homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).
			I performed a homeland defense activity for at least 90 days, ending on, which is fewer than 540 days before I file this bankruptcy case.	If your exclusion period ends before your case is closed, you may have to file an amended form later.